

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10-030,940
APPLICANT

CLAIMS	AS FILED				AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.				
	1	1	1	1	1	1	1	1				
1	1								51			
2		1							52			
3		2							53			
4		2							54			
5		(1)							55			
6		(1)							56			
7		(1)							57			
8		(1)							58			
9		(1)							59			
10		(1)							60			
11	1								61			
12		1							62			
13		1							63			
14		3							64			
15		3							65			
16									66			
17									67			
18									68			
19									69			
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39									89			
40									90			
41									91			
42									92			
43									93			
44									94			
45									95			
46									96			
47									97			
48									98			
49									99			
50									100			
TOTAL IND.	2								TOTAL IND.			
TOTAL DEP.	19								TOTAL DEP.			
TOTAL CLAIMS	21								TOTAL CLAIMS			